

MSU/LSU Issue 55, October 2022

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WELCOME

Welcome to the 55th edition of the Newsletter on the theme of *Patient and carer access to peer-support*. It has been incredible to read through so many articles and good practice examples from our member services.

This edition contains articles with detailed information on the support offered to patients and carers, as well as the role of various peer-support workers. I strongly recommend sharing the newsletter as widely as possible with staff, carers, patients and visitors. It is a good resource for services who are thinking of introducing peer-support services for their patients and carers.

With the new cycle, cycle 14-8 (2022-2023) starting, we have decided to continue facilitating developmental reviews virtually but to go back to in person full reviews. The first few reviews have now taken place successfully and we are all really looking forward to visiting services in person again.

Very excitingly, we will be running our Festive Card Competition shortly and more information can be found within the newsletter. We cannot wait to see all the entries!

The Annual Forum took place over the summer, which was a hugely successful event. We had presentations on the topics of relational security,

restorative justice, reducing restrictive practices and Hospital Rooms. The event also included various workshop presentations on the topics of peer support for patients and carers, co-production and access to technology.

Lastly, the Network has been planning on introducing an accreditation membership and a steering group will be put together to discuss how to best do this. This requires careful planning and consideration and more information can be found within the newsletter.



Kelly Rodriguez, Programme Manager

Peer Support in In-Patient Medium Secure Forensic Services

By Andrew, Senior Peer Support Worker, Arnold Lodge, Nottinghamshire Healthcare NHS Foundation Trust

Dear readers,

My name is Andrew. I am the Senior Peer Support Worker at Arnold Lodge, a Medium Secure Forensic Hospital within Nottinghamshire Healthcare NHS FT. Arnold Lodge has three care pathways: Male Personality Pathway, Women's Pathway (including WEMS), and Male Mental Health (Psychosis) Pathway. My role encompasses all three Pathways.

As the first Peer Support Worker in In-Patient Forensics, I reflect on the last 20 months, how we have established Peer Support, and the impact on the experiences of our Patients / Service Users and the Service. Across 2021 and 2022 the input from the Peer Support Worker and Peer Development Team within the Trust has contributed to significant developments and achievements within our patient group. The value of the role has been acknowledged and has now started a recruitment campaign for additional Peer Support Workers in the Forensic Directorate.

Despite the challenges of the last 18 months Peer Support has continued to support patients' progress and achievements. In both 2021 and 2022 Arnold Lodge patients have reached the finals of the National Service User Awards. A fitting reward for their hard work, and I am proud to have contributed to this. We continue to endorse involvement and collaborative approaches to promote the patients' voice in shaping their care and influencing developments within the service. Projects have included a collaboration

between Peer Support and lived experience facilitators at IMPACT to help patients develop confidence and skills to Chair their own ward rounds and CPA meetings. We are currently planning a QI project to educate patients in quality improvement and to develop skills to participate and contribute to QI project teams, and to have influence within the improvement agenda. We also maintain our focus and input in important areas like Reducing Restrictive Practice.

So, what does a Peer Support Worker do all day I hear you ask?

We meet at 8.30am and plan our day. For me that will involve my individual sessions on the wards. It also includes meetings and presentations with multi-disciplinary colleagues at Arnold Lodge or the Trust Involvement Team to promote involvement and progressively ensure that the patient voice is represented in the necessary areas.

On a typical day I meet with and support patients with emotional wellbeing, help deal with relationship issues (internal and external), help with planning and encouragement with activities in their care plans.



Sometimes these have a specific focus e.g. Transitions work to help prepare patients for progressing along the treatment pathway / Recovery Journey. I may also support patients in the Recovery College and contribute to co-production of courses that other patients can access. I also support patients with planning their ward round from a patient perspective.

I also have fixed sessions each week where I will support specific patients that do not have current open ward access and are being nursed and cared for in LTS (Long Term Seclusion) or in the ICU. This will often involve just sitting with a patient and listening, which I believe is vitally important for patients who are struggling. Using the 8 core principles of Mutuality, Reciprocity, Non-Directive, Progressive, Recovery Focused, Strengths Based, Inclusive and Safe allows us to show compassion and understanding as we walk alongside patients in their journey with a focus on Hope and the Future but being mindful of the here and now at the same time.

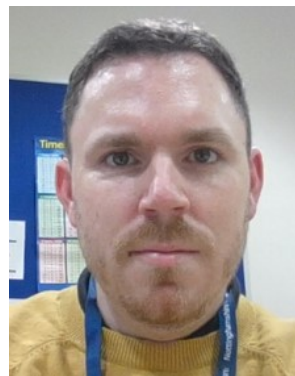
So, how has it been working in Mental Health Services where I was once a patient?

I feel extremely privileged to promote how Peer Support can contribute to a Forensic

setting. 20 months ago, we started with a blank canvas but have been able to embed so much in that time. I hoped my progression would inspire hope in others, and the success of the contribution means that Arnold Lodge have recruited a new Peer Support Worker and plan to recruit another Peer Support Worker in the coming weeks.

I am extremely proud to demonstrate to other service users how you can make a meaningful recovery and live a full and varied life with a mental health diagnosis, and the fact it does not have to hold you back in your dreams and ambitions. I am so proud to be a part of Peer Support and what it represents.

Wishing you all a restful and safe autumn, Andrew.



Left: Andrew, Senior Peer Support Worker, Arnold Lodge, Nottinghamshire Healthcare NHS Foundation Trust

Spaces for Carer Peer Support

**By Bev Woolmer
Carers Lead, Specialised Community Forensic Team**

Spaces for carer peer support are vital yet often not very visible or known to staff who work within secure services. Our carer support group meets monthly and has been running for several years, it use to be face to

face and since covid we meet online. It brings accessibility for families who live further away from the hospital, but is different to meeting face to face with tea and biscuits.

As a service we work in partnership with Rethink, and are lucky that within Bristol they have a dedicated and valued carers service. Together we hold an informal space for carers to meet, we come together to listen and hear and to provide support.

Currently I am the carers lead for the Specialised Community Forensic Team (SCFT) and our Quality Manager for Secure Services is the carers lead for inpatients.

Engaging with carers is the work of all of us within Secure Services, being able to focus and develop our carer work within the SCFT, recognises the value of our carers and our commitment to working with them collaboratively.

Carers lead roles are most effective when they are not an added job in a long list of role responsibilities, it needs time and resources. I see our journey as a service as having exciting opportunities - to be bold, ambitious and create carer peer support roles.

Our carers support group maybe small but it offers a space to come together, it provides a commitment that we will protect the time for those who use it, we will hold it. It is a place of being, as oneself and a place of being with others.

There is more we could do and as a service we recognise that we have work to do, as we adapt to living with covid we are re-focusing our attention.

We are re-connecting our links and making

new ones with staff who have joined us, our Social Workers are referring more clients to Rethink, our OT team have invited carers to events, there is a co-production group committed to working collaboratively, there are shoots of growth.

We are exploring how we can connect with other carers who have loved ones within Secure Services, how we can build peer support. This idea came from one of our current carers, recognising that Secure Services has it's own challenges and differences, sharing these experiences with others provides support and understanding. The secure pathway and journey is unknown and often unrelatable to those who have never experienced it.

Our carers support group is where you hear their stories, experiences, their journey, their loved ones journey, the complexities and difficulties, what I hear most loudly is love and hope. Our carers love wholeheartedly.

It is a privilege to be part of holding that space, it offers compassion, empathy, a place to be heard and valued.

A Patient Representative's Perspective

By a Patient Representative, South London Partnership

We sat in a semi-circle, listening intently to the man in the centre. His story resonated. He had been a patient several years earlier on the same ward that I was a resident at the time, he now was living at home with his family sharing his hopes, frustrations and advice to the five patients and nursing staff

in that hospital room. This was the first spark of proof that there was a life beyond the ward and out of the forensic system. I was surprised that more patients had not attended this session, however memories of this intimate session almost ten years ago remain with me as evidence of the power of the peer.

Now I am a patient representative within the South London Partnership (SLP), a joint Provider Collaborative comprising Oxleas NHS Foundation Trust, South London and Maudsley NHS Foundation Trust and South West London and St Georges Mental Health NHS Trust. I am fortunate to be in a position to help steer the direction of some aspects of patient experience across our provider collaborative. This takes the form of attending meetings, providing a service user

input to agenda items and advising on projects for the benefit of our clients across the pathways. Since 2019, the SLP has been piloting, and now has formalised an offering known as Support Plus. The Support Plus service provides treatment, rehabilitation and aftercare to service users with a mental health condition and associated offending behaviour who have experienced the longest lengths of stay in secure services. The team supports individuals as they settle back to life in the community and helps them to navigate the obstacles and circumstances that prevent them from achieving their goals, embedded within the business case for both the pilot and now the permanent offer, was Peer Support. Remembering the impact that the session mentioned above had on me, I have been an advocate for establishing peer support workers since joining.

Across our trusts there are many examples of peer-based approaches and lived experience practitioners are already providing valuable assistance to service users and loved ones. So much so that we have governance, contracts and remuneration policies for the varying levels of involvement the peer may wish to participate in. As a provider collaborative we are keen to achieve the best outcomes for our patients. Peer support within Support Plus is in response to feedback from fellow patients that to truly understand our needs, a direct experience of what it is like on the ward, in the CPA or at Tribunal, or how to get appointments once discharged is paramount. Forensic peer mentors in Support Plus, like in any other speciality, have the potential to enhance engagement and trust between service users and clinicians across the entire diverse spectrum of patient population.

There have been a few gates to get through on our journey so far; despite almost unanimous support from management and clinical leads, recruitment of forensic peer mentors naturally triggers thoughts surrounding compatibility between role profile and historical offences. A green light

from the HR business partners was required, and we are very grateful for the discussions and advice from other trusts who are slightly ahead of us in adopting peer workers within forensics. Sensitive to establishing the right culture and ensuring appropriate governance, we formed a working group where adopting these new positions was clearly understood and supported. Earlier this year we received agreement and a clear path to begin recruitment.

At present, we are about to begin training our first cohort of forensic peer mentors. It is agreed that a staged approach to recruitment is preferable; hosting roadshows/ meet & greet sessions, training from established practitioners then recruitment through the formalised procedures. We feel this is a fair process, enabling our potential new colleagues the opportunity to learn what the role involves, managing expectations and establishing a baseline of equality from an experienced standpoint. Our training covers a very similar scope as other more established peer worker roles, to ensure our new colleagues feel comfortable and confident in their role within this team. We are hopeful that at the end of summer 2022, we will be in a position to recruit and to offer these four positions across our trusts for the benefit of our clients.

We are in the process of defining metrics to evaluate the impact of Peer Mentors which, we anticipate, will be mostly qualitative feedback of the benefits and areas for improvement. This is a larger scope of work however one we feel is necessary to embed a more wide reaching offer within our wards and communities across South London. I watch as others adopt similar approaches across the nation, I am excited at the prospect of many more of my peers having access to the experience and hopeful stories that I remember so well from almost a decade ago.

Family Ambassadors

By Kirsty Murray, South London and Maudsley NHS Foundation Trust

Family Ambassadors are a new role that emerged from the Children and Young People Quality Improvement Taskforce. The Taskforce has the overarching vision of delivering mental health, learning disability and autism inpatient services to the consistently high standard that children and young people deserve. Notably the Joint Committee for Human Rights report of 2019 highlighted the importance of the role of parents and family carers as “Human Rights defenders” and stated it was pivotal for the NHS to review the way families and carers were engaged with. This expert by experience role is one of the early quality improvements, set out across five ambitions, and falls under Care Management.

“I’m the parent of an autistic young person who has been an inpatient. When I saw this role advertised, I thought, ‘what a great idea!’ I wish that someone had been on the ward to support us when my child was admitted. I felt very isolated – I didn’t know anyone who had a similar experience. I remember sitting in meetings trying to follow what was being said and being embarrassed to admit I didn’t understand.” Brigid, South London Partnership Provider Collaborative Family Ambassador.

The Family Ambassador has a similar function to a Peer Support Worker with some key differences. Parents may have a greater need for advice and training and to develop

the confidence to act as a partner in care when compared to a service user supported by a peer with direct lived experience. The aim is to support and empower families, working with parents as partners – to amplify the voices of families in the care team. The roles support a parental rights-based approach and are designed to ensure that wherever possible, no decision about a child’s care is made without their involvement.

“My lived experience left a lot of tension in the family. There was extremely poor communication with the ward and everyone felt out of the loop. Ultimately a member of staff with a supportive listening ear who had had a similar experience would have been unbelievably helpful. The state of stress at the point of admission can leave everyone feeling extremely dazed and confused, to have someone to go through all the information slowly, as many times as necessary and with no judgement would have been invaluable and saved a lot of time and stress.” Scarlett, South London Partnership Provider Collaborative Family Ambassador

One of the most important functions of the Family Ambassador is as a listening ear, a place to offload the emotions and difficult feelings that may arise. The Family Ambassador supports families from admission to discharge, including transfers and transitions, outlining what to expect at each stage and helping parents and families understand inpatient system processes e.g. the Care Plan Approach, Care Education and Treatment Reviews, tribunal; and signposting to the staff on the ward to ensure a joined-up approach. Seemingly simple interventions such as empowering parents to access information about their rights, and to be part of planning (with consent), jargon busting



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and understanding staff teams can have a significant positive impact on the experience of an inpatient stay.

“Though wards rightfully take a multi-disciplinary approach, having one named person to rely on for practical and emotional support can make communication feel much smoother. Already in these early days of implementing this role, there has been positive feedback around being able to go through information given in meetings, for parents to check their understanding, and to have time with someone to process what has been said. I sometimes felt my family's identity was swallowed up by mental health difficulties but having experts by experience in post shows other families that life can and does move on, and people are here for them every step of the journey.” Heloise, South London Partnership Provider Collaborative Family Ambassador

Knowledge of and a connection into the networks in a local area can support signposting for both local families with new and emerging needs to meet, and for

families whose children are in Out of Area placements and need support when visiting their child. Over time it is hoped that supporting families to work with units and considering how units can optimise their working with parents will provide feedback on what has gone well and where things could be improved.

“When a young person is admitted into hospital, it is often a traumatic and confusing time for families. We're here to help navigate health services and to provide information, to aid working, in co-production with ward teams. Our focus is on supporting families and meeting their needs which are often misunderstood and overlooked.” Truska, South London Partnership Provider Collaborative Family Ambassador

It's an exciting time, with the service having recently gone live. Feedback so far has been extremely positive and the South London Partnership Provider Collaborative is progressing this pilot to their secure programme.

A Peer Support Supervisor's Perspective

By Lyndsey Tunney, Peer Support Supervisor, Cumbria Northumberland and Tyne and Wear NHS Foundation Trust

If someone had told me 10 years ago that I would be here now writing an article for the Quality Network about a career I'm so passionate about I wouldn't have believed them. I would probably have dismissed it as another one of the unusual thoughts I experienced at the time. 10 years ago I was unwell. I needed help. I needed support from services. That was my introduction to CNTW. I was a patient and although I probably

didn't recognise it much then I'm extremely grateful for the support I received during those difficult times.

As I progressed in my recovery I became a volunteer helping to deliver courses in the recovery college. It was around this time that the trust started recruiting for people with lived experience to work alongside the clinical teams and I knew straight away that is what I wanted to do. I became a Peer Support worker in 2016. I've worked as a Peer in different settings but I always had an interest in secure services and settled where I am now in 2019.

The last 3 years working as a peer in secure care have been interesting, educational, challenging, rewarding and fun. I'm fortunate to work with a really good team. I have a manager that understands the value

of lived experience and allows me the freedom and flexibility to be creative in my work. CNTW are pioneers and leading the way nationally in Peer Support but it's still developing and growing. My role allows me to work with patients across all of the secure inpatient wards. Adult male Low/Medium Secure and Mental Health/Learning Disability.

I'm often asked "What is a Peer Supporter? What do you do?" and that isn't an easy question to answer in an article where I'm only allowed 750 words! We have lived experience of services and we use our experience to share insight, understanding, compassion and empathy with others. We challenge stigma, promote hope and recovery. Although we are not advocates we may represent the voice of service users, while encouraging service users to take an active role in their own care and treatment. We work directly with service users either 1-1 or in groups, often doing meaningful activities or courses in our recovery college. The courses we run each term are co designed and co delivered with patients and peers. We work alongside the MDT in formulation meetings, ward rounds, discharge planning and training when required.

A big part of our role as Peers is Patient and Carer involvement. We are part of the Recovery & Engagement Team in Secure Care. We support patients to attend their own meetings in relation to their care but also to set up their own patient peer network. A good example is our patient LGBTQ+ support group which is celebrating its first Pride event at Northgate this month. We

support patients to attend meetings around advocacy and we have allocated Patient Reps on each ward which together form our Patient Recovery Council. We are trained in WRAP – Wellness Recovery Action Plan and use this with our patients, supporting them to identify their own recovery goals.

We also work with carers and have recently employed our Carer Peer Supporter. She has lived experience of caring for a loved one in a secure setting so her role allows her to engage with family friends with some insight of what it feels like for them.

We are currently rolling out the carer awareness training to all clinical staff across our service and this is so much more powerful and meaningful with the voice of a Carer Peer Supporter. Secure care patients are supported by Peers to go on leave and do activities that are meaningful for them. We encourage patients to take part with involvement activities such as training and interview panels. We work alongside colleagues on the ward, Occupational Therapy, SALT, Psychology, Woodwork, Education, Sports, Art, Medics and Managers to support the people we care for.

I'm very happy that just recently I've been seconded to the role of Peer Support Supervisor. Our team is growing as we recruit new people into these important roles. We currently have 4 Peers working into our inpatient wards and recruitment has started into the community teams. As we look ahead to our new build MSU Sycamore opening next year there are lots of changes ahead for Secure Care and the future is looking bright for peer support. Exciting times.

Festive Card Competition

The QNFMHS Festive Card Competition will open soon. The winner will be featured on the virtual Christmas card that will be sent to our members.

Keep an eye on our [website](#) for updates.

Peer Support Working: Lived Experience, Support and Hope

By Bryn, Peer Support Worker, St Andrews Healthcare Northampton

My name is Bryn, I work within St Andrews hospital in Northampton, and I predominantly work on a medium secure brain injury ward as part of the wider MDT. I am proud to say I am a Peer Support Worker.

On some level Peer Support has always been around us. Talking with friends, family and support groups etc. can all come under the umbrella term of peer support. In more recent years it has become apparent that having somebody with specific lived experience, working alongside patients and service users as part of their care team, can be highly beneficial. Thus Peer Support is growing as a career pathway, which not only is a boon to the health service and patients, but to us Peer Support Workers ourselves.

Many of us used to believe we wouldn't be able to maintain a career due to our mental health, or didn't feel confident because of the apparent stigma still involved with employing us. It has given many of us a boost to our self-belief and confidence in being able to contribute to the workplace.

The role itself is, in a very general way, defined as using our lived experience to help promote hope, recovery and rehabilitation with the patients and service users. Personally I have found that mine and my colleagues peer support work goes much further. We are often as much support to our fellow ward staff as we are to the patients.

I feel, as a human being everyone is my peer, and I will offer my support to whoever and wherever it is wanted. On some level this is something I have always done throughout my life. To be able to do this, while also

making use of my lived experience, in a formal role has been probably the most rewarding career move I have ever made.

Day to day my role can encompass many things, like a simple reassuring chat, card & board games, group activities to encourage social skills, accompanying patients off the ward to the buildings café or for walks in the grounds.

These last two I find the most beneficial, once you leave the ward with a patient they just seem to bloom. Feeling freer to talk and interact on a one to one basis away from the clinical environment. Initially it came as quite the surprise to me as it felt as though I had left the ward with one patient and emerged outside with a different person. It was remarkable and really lovely to see. I still find it astonishing that this happens but I now understand more about why. I actively look forward to engaging with a patient on this level as it gives them a chance to just be themselves.

Whilst on the ward I find myself being a kind of bridge between patients and the clinical staff. Due to the nature of most brain injuries there is quite often a lack of patience and understanding. If a patient wishes to speak to a member of the clinical team who may be otherwise engaged I can pop into the office to gain the information. I can offer a perspective to the clinical team about how a patient might feel or respond to certain situations, and conversely I can help to explain to patients why certain decisions or choices may have been made regarding their care.

As a non-clinical staff member I have the freedom of time to sit with a patient to talk for as long as they need, or even just sit silently if all they require is company. I don't have observations and other nursing duties within the ward, my time is purely for the help and benefit to any of my peers.

I find I also work quite closely with both the psychology and occupational therapy teams, as there is a bit of an overlap and I can assist with some of the work they do.

As I have stated above, my particular area is a brain injury ward. This brings its own unique set of challenges the same as every brain injury does to the individual concerned, from behavioural to physical.

Here at St Andrews Healthcare the Peer Support role started in 2019 and is gradually becoming more and more integrated into the wider MDT.

Initially many ward staff were unsure about our roles, but over time we have shown what we are capable of doing and that we can be

of benefit the entire ward. Now our department is receiving many more requests for PSW's on other wards, we are growing in number and finding more and more ways in which we can support a patient's recovery journey.

This now includes running a patient recreation club, also working alongside our in house recovery college to give patients and staff access to specialised courses and assisting with the transition from medium secure to low secure, and further on into the community.

We look forward to expanding wherever we can to offer our lived experience, support and hope.



Artwork: "Recovery Bridge" by Bryn

Knowledgehub

Have you joined the QNFMHS Online Discussion Forum yet?

Joining Knowledge Hub will allow you to:

- Share best practice and quality improvement initiatives
- Seek advice and network with other members
- Share policies, procedures or research papers
- Advertise upcoming events and conferences

We use Knowledge Hub as our main way of communicating with our members, so in order to keep up to date with the Quality Network, ensure you sign up!

Email 'join Knowledge Hub' to forensics@rcpsych.ac.uk

Peer Support Workers

By Dr Teresa Wolowiec, Clinical Psychologist, East London Forensic Community Service

When the East London Forensic Community Service started as a pilot in 2018, part of the vision was to embed peer support workers and carer peer support as an integral part of the team. Two peer support workers, with lived experience of recovery from mental illness, joined the original team, along with a carer peer support worker, with expertise in supporting the families and friends of service users in the East London forensic community.

Despite the challenges of being a fledgling service covering seven boroughs across East London, not to mention a global epidemic and the myriad of complexities that entailed, the community team flourished and grew, became commissioned as a permanent service, and has benefitted hugely from the involvement of peer support at every level of service development and delivery. Two additional peer support workers with direct experience of being service users within the forensic mental health system were recruited at the beginning of 2022; they had completed the Peer Support Worker training offered by East London NHS's People Participation service, enabling them to use their lived experience to support others within the Forensic service. An additional carer peer support worker has also recently joined the team, and there are plans to recruit an additional four peer support/ carer peer support workers soon.

The peer support workers offer 1:1 work with service users who are leaving, or who have recently left, secure inpatient care and are facing the challenges of adjusting to life in the community. Interventions include supporting people with paperwork, attending appointments, motivation to get

out and about, going to the gym, deciphering how the washing machine works, coffee and conversations- basically, hands on, empathic support with all the nuts and bolts of life, tailored to what the service user needs at that point in time.

Similarly, the carer peer support workers have built relationships with families of service users, helping them to negotiate the often complex and confusing forensic mental health system, and offering them support as they support their family member in the next phase of their recovery journey.

The peer support workers have worked with the rest of the community team to develop a number of groups. The restrictions of Covid inspired the Walk and Talk group- a socially distanced stroll through East London parks that has become a hugely valued regular feature. The weekly group now explores further afield, discovering East London's nature and history whilst having an infinite number of good chats.

The fortnightly Bridge Club has been another great success: this is a social drop in group at a very cosy community space in Hackney. Service users from the local medium and low secure hospitals join people who have been discharged to the community, for dominoes and card playing, open mike sessions, art workshops, games of pool, and many cups of tea and good conversations. The peer support workers offer practical advice and emotional support, using their lived expertise to orienteer people through their recovery journeys. Bridge Club has become a genuinely valued part of many people's social lives, and continues to expand its activities to include summer picnics, autumn barbecues, trips to local bowling alleys and some white water rafting in the Lee Valley!

The peer support workers continue to develop innovative ideas for additional activities, including a recently started cinema group, and plans for a book club, a gym group and yoga and well-being sessions.

As well as supporting service users, the peer support workers undertake other activities, offering a uniquely valuable perspective in much of the work that the forensic community team do. For example, presenting at psychiatric academic meetings, co-facilitating staff training, joining in teaching sessions for psychology and occupational therapy students, and participating in whole team activities such as reflective practice and Tree of Life therapeutic training. They are supporting the wider forensic service in projects to explore complex issues such as why some people get stuck in the system and, crucially, how we should address inequalities inherent in the forensic mental health system. A peer support worker, who again has lived

experience of the forensic service, is one of the leads in the Equalities project. He developed and now runs a focus group for service users, enabling people to share their stories and to document the impact of trauma, inequality and cultural scripts on people's journeys through the mental health and criminal justice systems. Whilst the East London Forensic Community Service are incredibly proud of and grateful for the input of their peer support workers, the Equalities work is highlighting many, many injustices within the wider system, and flags up the huge amount of crucial improvement that needs to be made. This work would be impossible without the lived experience and expertise of peer support workers at its core.

Online Peer-reviewer training

Reviewer training is a free event for staff from a service that is a member of the Quality Network. The training is a great learning experience for those who are interested in participating in the new virtual peer-reviews of medium and low secure forensic mental health services.

The following training sessions will be held virtually on:

- 24 October 2022 (13:00—15:00)
- 19 January 2023 (10:00—12:00)
- 20 March 2023 (13:00-15:00)

If you are interested in attending, please complete this [booking form](#).

Dates for later 2023 sessions will be available later in the new year. Keep an eye on our [website](#) for more information.

QNFMHS Accreditation Steering Group



The Network is looking into the introduction of an Accreditation Membership. This requires careful planning and consideration. Therefore, a small steering group will be created. This group will comprise of disciplines from a range of services, including standalone and multi-ward services as well as private and NHS organisations. Information on how to join this group will be distributed shortly.

Useful Links

Care Quality Commission

www.cqc.org.uk

Centre for Mental Health

www.centreformentalhealth.org.uk

Department of Health

www.doh.gov.uk

Health and Social Care Advisory Service

www.hascas.org.uk

Institute of Psychiatry

www.iop.kcl.ac.uk

Knowledge Hub

www.khub.net

Ministry of Justice

www.gov.uk/government/organisations/ministry-of-justice

National Forensic Mental Health R&D Programme

www.nfmhp.org.uk

National Institute for Health and Care Excellence

www.nice.org.uk

NHS England

www.england.nhs.uk

Offender Health Research Network

www.ohrn.nhs.uk

Revolving Doors

www.revolving-doors.org.uk

Royal College of Psychiatrists' College Centre for Quality Improvement

<https://www.rcpsych.ac.uk/improving-care/ccqi>

Royal College of Psychiatrists' Training

<https://www.rcpsych.ac.uk/training>

See Think Act (2nd Edition)

<https://www.rcpsych.ac.uk/improving-care/ccqi/quality-networks-accreditation/forensic-mental-health-services/see-think-act>

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QNFMHS Knowledge Hub Group

www.khub.net/group/quality-network-for-forensic-mental-health-services-discussion-forum

Royal College of Psychiatrists' Centre for Quality for Improvement

21 Prescott Street, London, E1 8BB

www.qnfmhs.co.uk